

# This is THE camp to attend

Participants will learn the fundamentals of tennis and are guaranteed to have fun!!!

Sessions will consist of warm-up, mechanics work, drills, competitive scenarios and games.

Critter Camps: Tuesday, Wednesday & Thursday from 8:30 - 9:15am. Ages: 4 & 5. Cost: \$25.00

May 25 - 27

June 15 - 17

June 22 - 24

July 13 - 15

July 27 - 29

Mini Camps: Monday - Thursday from 9:30 - 11:30am.

Beginners & Intermediates ages 6 - 10. Cost: \$60.00

May 24 - 27

June 14 - 17

June 21 - 24

July 12 - 15

July 26 - 29

Full Camps: Monday - Thursday from 8:30 - 11:30am.

Beginners & Intermediates ages 11 - 15. Cost: \$95.00

May 24 - 27

June 14 - 17

June 21 - 24

July 12 - 15

July 26 - 29



#### **Registration:**

1. In person at Fair Oaks Tennis Center - phone: (770) 528-8480

2. Mail registration to:

Fair Oaks Summer Camp Fair Oaks Tennis Center 1460 West Booth Road Ext Marietta, GA 30008

Registration start date: April 1

Make checks payable to Andre Squires

## Registration deadline:

One week prior to first day of each camp.



#### FAIR OAKS SUMMER JR TENNIS CAMPS 2010 - REGISTRATION FORM

NAME			AGE DATE OF E	BIRTH	
ADDRESS		CITY	S	TATE	_ZIP
PHONE # (H)		_ Have you eve	er played USTA or ALTA?		If so, what level?
PROGRAM (please circle	): Critter Camp	Mini Camp	Full Camp		
WEEK(S) ATTENDING_			ABILITY LEVEL:	Beginner[	Intermediate
CONTACT PERSON			_ EMERGENCY PHONE	#	
E-MAIL					
OFFICE USE ONLY:					
Amt Paid	Cash☐ Check☐ Check #		Rect #	Date	Initials

### GENERAL INFORMATION

- *Rain-outs*: We are only set up for tennis and outdoor activities. A few times every summer we need to cancel a day, or stop a day short due to rain. If the weather is questionable or could be turning questionable, call Fair Oaks Tennis Center at (770) 528-8480.
- Make-Ups: Rainouts can be made up any other day of any other camp of the summer. PLEASE GIVE US 3 DAYS' NOTICE. All make-ups must be completed by last camp date. Refunds will not be given.
- Water and ice will be provided.

See our website at http://prca.cobbcountyga.gov

In order that the department assures compliance with ADA (Americans with Disabilities Act), please make the staff who work with the program/facilities aware of any specific physical or service accessibility need, so that we can reasonably accommodate your request.

#### RELEASE AND HOLD HARMLESS AGREEMENT - PERMISSION TO PROVIDE EMERGENCY MEDICAL TREATMENT

Realizing the nature of this program, its physical demands and how important it is to follow rules, regulations, and instructions outlined by the staff of the Cobb County Parks, Recreation and Cultural Affairs Department, I am, to the best of my knowledge, in good health and able to participate in the program. I authorize the staff of the Cobb County Parks, Recreation and Cultural Affairs department to organize any required medical or first-aid procedure, or to take the undersigned to a hospital emergency room treatment. If any major treatment is required, I understand that every effort will be made to notify the individual indicated as emergency contact beforehand by telephone.

The undersigned hereby forever releases, discharges, and covenants to hold harmless the Cobb County Parks, Recreation and Cultural Affairs Department, the Cobb County Recreation Board, the Cobb Arts Board, the Cobb County Board of Commissioners and Cobb County, Georgia and any other person, firm, corporation charged or chargeable with responsibility or liability, their heirs, administrators, executors, successors and assignees from any and all claims, demands, damages, costs, expenses, loss of services, actions and causes of action belonging to the undersigned or arising out of any act or occurrence in connection with and particularly on account of all personal injury disability, property damage, loss or damages of any kind sustained or that may hereafter be sustained arising out of the matters described herein or in consequence of the participation in the recreation program sponsored by the Cobb County parks, Recreation and Cultural Affairs department. The undersigned hereby bind their heirs, administrators, executors and successors. Further, this agreement shall apply to all unknown and unanticipated injuries and damages directly or indirectly resulting here-from. This Release and Hold Harmless Agreement shall constitute a full and complete release of any and all claims.

DATE:	BY:	
		Signature of Participant
DATE:	BY:	
		Signature of Parent or Guardian

Signature of participant and parent/guardian are both required if participant is under age 19, or is registered for a program for the mentally or physically challenged, or other special population member.